

child care can force the working poor to seek or return to public assistance

The Governor's Task Force on Child Care made the following recommendations regarding child care as it relates to Families First:

- Expand the supply of child care;
- Improve the quality of child care;
- Create partnerships with the business community for more affordable child care; and
- Educate the general public and especially the business community about the need for more and better child care.

The task force included a recommendation to "increase reimbursement rates to the 80th percentile of market rates for defined geographic areas." The "geographic areas" separate rates into urban and rural categories based on the location of the child care facility. Increasing reimbursement rates is a major strategy for both expanding the supply and improving the quality of child care.

For every dollar invested in quality preschool programs, there is a seven-dollar return through reductions in future costs of a variety of social problems such as teen pregnancy and juvenile delinquency, according to the High Scope/Perry Preschool longitudinal study.

Other research on the effects of early childhood education, reported in the February 3, 1997 issue of *Time* Magazine, showed that "bad day care can harm the development of any child. Research has shown that children benefit when caregivers are trained and the ratio of staff to children is high.

"Good, affordable day care is not a luxury or a fringe benefit for welfare mothers and working parents, but essential brain food for the next generation."

HIV AND AIDS

HIV/AIDS is a significant health problem for infants, children, and teenagers in Tennessee. Of particular concern are HIV-infected mothers and their perinatally exposed newborns. Indicators are that the occurrence of new HIV infections among childbearing women remains fairly stable. However, new research into the treatment of HIV-infected mothers and their newborns promises to lower the rates of infection among these exposed infants. Also of concern are teens who are sexually active and use alcohol and other drugs and are consequently at increased risk for HIV infection. Again, indicators point to a stable rate of new HIV infections among persons age 13 through 19.

As of December 31, 1996, the Tennessee Department of Health reported 90 infants, children, and teens in Tennessee had progressed to AIDS. From January 1, 1992, through December 31, 1996, another 239 infants, children, and teens in Tennessee have been reported with HIV infection only (not AIDS). Nationally, 9,870 persons age birth through 19 have been reported with AIDS through June, 1996. HIV infection only (not AIDS) is not reported by all states.

Please note that these figures under-represent the total number of persons age birth through 19 in Tennessee who are infected